

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF THE UNITED STATES of AMERICA		COURT CASE NUMBER 00-CV-2229
DEFENDANT ALFRED ZOTYNIA & TINA ZOTYNIA		TYPE OF PROCESS NOTICE OF US MARSHAL SALE
SERVE ➔	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN TINA ZOTYNIA	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) HC #1 Box 123 Greeley, PA 18425	
AT		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:		
<div style="border: 1px solid black; padding: 5px;"> GOLDBECK McCAFFERTY & McKEEVER Mellon Independence Center, Suite 5000 701 Market Street Philadelphia, PA 19106-1532 </div>		
Number of process to be served with this Form - 285		
Number of parties to be served in this case		
Check for service on U.S.A.		

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

PLEASE SERVE ABOVE DEFENDANT OR PERSON
IN CHARGE

Signature of Attorney or other Originator requesting service on behalf of: <i>Joseph A. Goldstein</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 215-627-1322	DATE 5-6-04
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. 67	District to Serve No. 67	Signature of Authorized USMS Deputy or Clerk <i>G. Lanell</i>	Date 5/7/04
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

**FILED
SCRANTON**☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

JUN 22 2004

Date of Service 6/18/04	Time 10:30
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PER *[Signature]*
DEPUTY CLERK

Signature of U.S. Marshal or Deputy

Richard J. [Signature]

Service Fee 135.00	Total Mileage Charges (including endeavors) \$ 32.40	Forwarding Fee	Total Charges 167.40	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

6/18/04 (1) DUSM (0900 - 1130) 90 miles Rd Tp.
(135.00 + 32.40) = \$167.40